

FLWEMS Paramedics Adult Protocol for the Management of:  
**THROMBOLYTICS, Patients Receiving**

**Indications**

To outline the paramedic care and management of the patient receiving thrombolytics during facility-to-facility patient transports. This protocol does not apply to pre-hospital emergency medical care as the GLWACH Paramedics are not authorized to administer Thrombolytic Agents in the pre-hospital setting.

**NOTE:** Thrombolytic therapy medications are NOT to be administered by GLWACH Paramedics until AFTER the Emergency Department attending Physician/PA have evaluated candidate patients. Administration of this type of medication is to be done only upon the direct verbal/written order of the attending ER Physician/PA.

**Procedure**

1. Secure airway as per airway management protocol and provide supplemental **Oxygen**.
2. Monitor cardiac activity.
3. Obtain 12 Lead ECG as needed or every 15 minutes to monitor for ECG changes.
4. Secure a copy of initial ECG and blood samples (or results of lab data) prior to initiation of thrombolytic agent. Have ECG faxed to medical control.
5. Assure that all sticks have been made prior to infusion of thrombolytic agent.
6. Establish a minimum of two large bore IV lines in different arms prior to initiation of thrombolytic agent. One line should have a stopcock for blood sampling. No lines are to be removed during the first 6-12 hours post infusion.
7. Administer **Heparin** as prescribed by medical control.
8. Obtain an order from the referring physician and/or medical control. IF using **Alteplase** (t-PA), administer as follows:
  - a. If patient weight is >65kg:
    - (1) Infuse 15mg (15ml) over 2 min (pump rate at 450ml/hr).
    - (2) Then 50 mg (50ml) over 30 min. (pump rate 100ml/hr).
    - (3) Then 35mg (35ml) over 60 min (pump rate at 35ml/hr).
  - b. If patient weight is <65 kg:
    - (1) Infuse 15mg (15ml) over 2min (pump rate at 450ml/hr).
    - (2) Then 0.7mg/kg over 30 min.
    - (3) Then 0.50mg/kg over 60 min.
9. Upon completion of **Alteplase** (t-PA) infusion add 20ml **0.9% NaCL** to bag and flush tubing of **Alteplase** (t-PA).
10. Discontinue infusion: DO NOT flush line when dosing complete when less than 100 is to be infused.
11. Record a rhythm strip (12-lead if available) prior to initiation of thrombolytics, upon completion of infusion, and if dysrhythmias are noted.
12. Observe closely for bleeding/bruising.

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13. Avoid arterial and venous punctures after initiation of **Alteplase** (t-PA).
14. Discontinue administration of **Alteplase** (t-PA) if hematemesis, unusual back pain, or any changes in neurologic status occurs.
15. Follow the referring facility's protocol for use of any other thrombolytic agents or contact medical control for orders.
16. Contact medical control for further orders as needed.

**CAIRA/Chemical Surety Considerations**

None

**Triage Considerations**

Refer to S.T.A.R.T. Triage Protocol

**END OF SOP – NOTHING FOLLOWS**